

formal presentation will take place on the University of Michigan-Flint campus on Monday, January 10.

The Carnegie Foundation for the Advancement of Teaching created the "Engaged University" classification to acknowledge the achievements of schools throughout the United States that have created institutional practices of community involvement. Universities apply for the classification and are granted the classification based upon their mission, culture, leadership, resources and practices.

The University of Michigan-Flint was able to demonstrate the integration of curricular engagement, outreach, the exchange of knowledge, and partnerships, with the larger community to the benefit of both groups. The school has an established practice of honoring faculty for their involvement, encouraging students to extend the education process outside classroom walls, and utilizing the school's resources to enhance the community.

Mr. Speaker, please join me in congratulating the chancellor, Dr. Ruth Person, the provost, Dr. Gerard Voland, the faculty, staff, students and community for their vision, enthusiasm and commitment to this partnership. I commend the University of Michigan-Flint for their hard work and for receiving this classification from the Carnegie Foundation for the Advancement of Teaching.

THE WALK FOR HEALTHCARE:
HEALTHCARE STORIES FROM
OHIO COLLECTED BY OGAN
GUREL, M.D.

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, January 6, 2011

Mr. KUCINICH. Mr. Speaker, I submit the following stories, collected by Dr. Ogan Gurel.

"Jean doesn't want socialized medicine. But she also adds that the current system doesn't pay (or reward) for preventative care. But it wasn't clear to her how either the free-market or government could change that. 'People have to take responsibility for their health,' she told me." Jean—Van Wert, 7/4/2009

"Todd recently lost his job as a machinist. His wife gets health coverage as a school teacher but 'It's not good insurance,' he tells me. 'The out-of-pocket payments are ridiculous,' he added. They have two kids—two and four years old—and he wonders what will happen if they get sick. 'It's a great thing you're doing,' he said, as I shook his hand, thanking him, too, in return." Todd—Van Wert, 7/4/2009

"Mike, in the middle, shared with me his father's situation. 'He's 52 years-old, a retired GM, Delphi employee, salaried, he was.' Mike looked at me to make sure I understood. 'He was a salaried worker,' he repeated. 'Which means they took away all his health benefits last April. Wage-earners got to keep their benefits, you know.' I nodded in acknowledgment. 'So, he's too young for Medicare, and now has a bad, bad situation.'" Mike—Van Wert, 7/4/2009

"John, on the right, told me 'I have good insurance but premiums have gone up 30% in the last year.' He took me in to his garage, out from drizzle, to meet his family and friends. 'I'm not happy with the healthcare situation,' he told me." John—Van Wert, 7/4/2009

"Serving up a cup of coffee, Holly, at the Rooster coffee shop, told me she doesn't have

health insurance. 'I hope basically not to get sick,' she said with a serious look beyond her youth. 'Pretty much that's it.'" Holly—Middle Point, 7/4/2009

"Tara, the cook at the Rooster truck stop near Middle Point, Ohio, has no insurance. 'It's just too much . . . that's the situation.'" Tara—Middle Point, 7/4/2009

"Dee told me the story of her uncle. He had a heart attack a few years back resulting in cardiac surgery and a bill for \$145,000. 'Dee, I'm dying,' he said, not clear, as Dee told me, whether he was referring to his health troubles or the financial burdens. Dee told her uncle to change his diet, do yoga, lots of walking, and other things to improve his lifestyle and health. And so he heeded her advice and actually, to do these things, went back to India. Returning some months later, he proudly called Dee telling her that he was healthier, no longer had diabetes, and no hypertension. But, he lamented, 'I still owe \$145,000.'" Dee—Van Wert, 7/5/2009

"Jim drove out from Ft. Wayne (after hearing the news) and met up with me near Middle Point on his bike. We walked together for seven miles talking healthcare and healthcare reform along with many other topics. He's a Yale grad, which goes to show that even traditional rivalries can walk together towards a common goal. He believes in basic care for all but, as he told me, 'the definition of what is basic becomes problematic. And those that can afford more than the basic,' he added, 'should be able to get it.'" Jim—Gomer, 7/5/2009

"Nancy is 60, without work and without health insurance. She has recently moved in with her mother. She has two prescriptions which cost her \$140 a month and works odd jobs to pay for one of these. She lives one day at a time and hopes that there'll be healthcare reform. 'So people like me can get the prescriptions we need.' We met on a porch in Gomer (she was helping to clean up someone's home) where she brought me some juice. Here she is on the roadside near Lima, later that afternoon, bringing me a glass of water as she was driving to her mother's place." Nancy—Gomer, 7/5/2009

"Gloria's husband died three years ago. She now has \$1,600 a month between Social Security and the Ford pension. 'It's a good plan,' with prescriptions at \$2 each, she told me. Her other story, which bothered her deeply, was about her son. He had retired after 22 years of distinguished service in the Navy—the highly stressful submarine service once dueling daily, in secret, with the Soviet Navy. He had a quadruple bypass and also an abdominal aneurysm operation. 'All that went well,' she said, 'but he had a very tough time getting reimbursed, especially since his operations left him very sick and weak.' He had to fight to be reimbursed while lying in bed recovering. 'I've seen other veterans have the same struggles,' Gloria told me. 'And it's a real shame we treat our heroes this way.'" Gloria—Lima, 7/5/2009

"Grace, the youngest, hasn't had any healthcare troubles and is hoping to get insurance as a student when she enrolls in college. She does believe that some sort of healthcare reform is necessary." Grace—Lima, 7/5/2009

"Kimberly has a brain aneurysm, which, she told me, 'they are watching.' She's also had a falling bladder problem, which they are not doing surgery on. In terms of insurance, she's on Medicaid and Medicare but told me, 'I can't afford the medicines'. Otherwise, it's not been a problem. Everybody,' she added smiling with a serious look, 'should have insurance.' Her effervescent daughter, Tiffany, gave her mother a hug." Kimberly—Lima, 7/5/2009

"Steve, a financial consultant, wants the government out of healthcare. He believes

that health insurance should be private (and through the employer). 'Government messes everything up,' he tells me. 'Actually, I make my living fixing up government accounting troubles,' he added. But he does believe that the healthcare system could be much more efficient." Steve—Lima, 7/6/2009

"Brad, the manager at the Lima Holiday Inn, was enormously helpful and supportive of the Walk. When I met him, he agreed that it's important to get the story out and told me, 'it is really terrible with all the uninsured. Even if you have insurance,' he added, 'I've seen how difficult it is dealing with the insurance companies.'" Brad—Lima, 7/6/2009

"With an angry look on his face, Roger told me very clearly that does not like the Obama plan at all. But he also doesn't like corporate interests driving reform. 'We do need some change—it's incredibly expensive,' he told me further, citing his father's case. He had gotten a pacemaker and defibrillator and, 'Everything cost more than \$200,000!'" Roger—New Stark, 7/6/2009

"Kara's 19 years old and had most recently been just under her parent's health coverage. 'But after nineteen, they take you off,' she told me, and she's now in the process of re-enrolling in her own plan. During this switch, she's actually without coverage. She sighed, 'My current job doesn't pay enough to afford insurance and then, when I'm in college, two years from now, I'll have to re-apply.' She's got asthma and fibromyalgia. It's a real problem, she told me as she's 'really worried' about pre-existing conditions disqualifying her or making her insurance too expensive." Kara—Lima, 7/6/2009

"Kate's insurance costs her \$200/month. She threw her hands up and exclaimed, 'That's a car payment!' She looked me in the eye and continued. 'So, I'm 55 and no business not having insurance but I can't afford it.' She told me about her carpal tunnel syndrome, that she had had a mild stroke and a nagging rotator cuff injury. For the rotator cuff, she can't afford the MRI. 'Actually,' she added, 'HCAP, a state program, can take care of the actual MRI but not the reading. So,' she said with a sigh, 'I can't afford it.' Her husband doesn't have health insurance either. 'He's got two bulging discs in his spine but can't do anything about it. So he can't work and spends the day reclining on the couch.'" Kate—Lima, 7/6/2009

"Heather (on the right) is 23 and recently divorced. She had good insurance through the marriage and actually had significant gastrointestinal problems for which she had four surgeries. She had a gall bladder operation, colonoscopies, 'they looked down my stomach too,' and also sinus surgery. She now works two jobs (the one at Applebee's provides insurance but takes up the entire paycheck). 'It's so strange,' she adds, 'I have to get a money order to actually cover it and send it to the health insurance company headquarters—\$120/month. But I went to the dentist and still paid \$30. But without insurance it cost \$40, the dentist told me.' She looked over at her friend, who nodded in sympathy. 'I don't think insurance makes sense at all.'" Heather—Lima, 7/6/2009

"Joe, the flagger at the construction site, believes in individual responsibility and accountability. 'The government always messes things up,' he said, but he likes the Walk—'you're doing a good thing,' and concluded by saying, 'some change is definitely needed.'" Joe—New Stark, 7/7/2009

"I met John, a traveling salesman, at dinner. He's got coverage, for which he is grateful for. He's been pretty healthy but feels that 'it is important that all people have health insurance.'" John—Lima, 7/7/2009

"Reuben actually stopped by the roadside to walk with me. He told me the story of his nephew, who's an Ob-Gyn doctor in Maryland. 'His entire paycheck nearly all goes to

malpractice insurance,' Reuben told me. 'Insurance companies are trying to get everyone who can pay, even by coercion.' He told me he thinks it's important to keep the profit mongering out of the health insurance business. 'It's devastating,' he added. In terms of his own health insurance, as a child he survived Hodgkin's disease but has recently been diagnosed non-Hodgkin's lymphoma. 'It's a risk factor of childhood Hodgkin's disease,' I told him. 'Yes, I know.' Though his insurance was '80/20,' as he put it, he did pretty well. 'That's good,' I said as we took a rest by the roadside." Reuben—Upper Sandusky, 7/8/2009

"Donna is the director of the Lighthouse homeless shelter (where I had stayed, while in Bucyrus). It was a nice, clean place which, as she told me, 'helps people when their most in need. The men here have gotta be clean of drugs, no criminal history, but they're otherwise down-and-out.' Her husband, 73 years old, is now on Medicare/SSI and had a complicated cardiac condition. He suffered a heart attack during a cath procedure and was taken by air ambulance to Columbus. He had a quadruple bypass and they ended up with \$250,000 in medical bills. Medicare went to 80%. They lost all their retirement in the stock market and now survive only on Social Security. They are filing for bankruptcy. 'The angel of the poor has, apparently, become poor herself because of our healthcare system.' In terms of herself, Donna has no health insurance. She's got atrial fibrillation (a heart rhythm abnormality) as well as diabetes and she pays for medicines out-of-pocket. But, thinking always of those less fortunate than her, she knows of many people all around who do without their medications because they can't afford them." Donna—Bucyrus, 7/8/2009

"Gary thinks we're way over-prescribed. As he put it, 'Too much medicines and pharmaceutical costs are skyrocketing.' He's been a retiree for the past eleven years and initially his health coverage was good. But premiums have steadily increased over the years so that by now more than two-thirds of his retirement income goes towards health insurance. I asked Gary if I could take his picture, to which he replied, 'Sure, why not? They can't punish me anymore.'" Gary—Bucyrus, 7/8/2009

"Todd's a forklift operator and has generally been very healthy. He once had foot surgery but had insurance. He believes that hospitals gouge people because there's, 'No healthcare system in place, no choice, and so they can overcharge those who pay, especially if out-of-pocket.' I observed an interesting story with the cat, a metaphorical commentary on how our healthcare system treats people. It turns out the cat is near death with a urinary tract infection. He could not urinate for days and the vet told them that the pet, quiet hiding the entire time I was there, could die any day now. As I got ready to leave, I suddenly heard some desperate moaning, followed by a piercing yelp. I turned around to see the cat urinating right on the floor in front of his food. 'Looks like he'll live another day,' said Todd, standing over the now exhausted cat. Todd looked over at me and added, 'If he wasn't so sick, I'd slap him for peeing on the floor.' It's tragically ironic that with people, so many stories play out exactly the opposite: people get slapped around precisely because they ARE sick." Todd—Bucyrus, 7/8/2009

"'As a single mom, healthcare has always been a struggle for me and my children,' Kim tells me. 'I have worked many jobs, as a social worker, in a hospital, and now as a reporter. These are good jobs but with the pay, healthcare premiums are just too expensive.' Her daughter has both bipolar disorder and

ADHD and she was on her father's insurance until January. But as Kim can't her own coverage, her daughter must do with Medicaid. 'Easier said than done,' Kim said. It took two months for her to get approved and in the meantime, Kim paid out-of-pocket over \$400 for her daughter's various medications. 'It put us in a real financial hardship with the house payment, utilities, and all that.'" Kim—Bucyrus, 7/9/2009

"According to George, 'public delivery of health care sounds like a good but it could go bad.' He added that, 'Our system is way over priced but if you're on a plan, you're golden.'" George—Mansfield, 7/9/2009

"This gentleman had Stage IV melanoma with metastases to the brain. He had extensive treatments and his life was saved but the biggest problem, he told me, 'Was the clerical and billing side. The paperwork and scheduling was horrible.' He summarized his very complicated tour through the healthcare system as follows: 'the clinical side was wonderful, the administrative a disaster.'" Mansfield, 7/9/2009

"I met Linda at the drugstore during one of my regular visits for antibiotic ointment. People often wonder why I buy five or six tubes at a time. She told me she's OK now but previously had Aetna as her health insurance carrier. 'It was a real problem,' she said, as no providers in her vicinity were covered: 'There was no choice, I had to go all the way to Columbus for my care.'" Mansfield, 7/10/2009

"I stopped at Mr. T's coffee shop on the eastside of Mansfield. 'I have no healthcare,' Richard told me. 'My doctor bills are \$60 and they, Medicare, pays \$15. We definitely need some healthcare reform.'" Richard—Mansfield, 7/10/2009

"Glendale's a World War II vet (Coast Guard). He tells me that being in the VA system, he's had no problems with health care. He had a heart attack six years ago with a quadruple bypass but, 'now,' he said, 'I'm doing fine.' He's been retired for 23 years, gets his medications from the VA and also receives Medicare and retirement benefits. 'I hope they get that healthcare in this country worked out, there's so many people without it,' he said. This is a man who fought for freedom; has his fight been in vain?" Glendale—Mansfield, 7/10/2009

"On a hot afternoon, Jane's store, Munchies, was a godsend. After downing water and ice cream, I asked her if she had any healthcare stories. She didn't offer any, but did say, 'I hope something gets done for everyone to have some health care insurance without hardship . . . especially for our seniors.'" Jane—Mansfield, 7/10/2009

"On this hot afternoon, along the long road east of Mifflin, I began getting desperately thirsty. A generous family answered my knock and I spoke with three generations of whom the oldest, Clara, told me her story. She described a situation with Aetna (Medicare supplemental plan) where her husband had gotten an infection and required a ten-day course of antibiotics—ten pills. 'But Aetna would only authorize four pills at a time,' she told me. This meant that for each time, in order to fulfill the full ten-day course, they had to drive forty minutes. That made three round-trips in total. Such a 'ridiculous expense and hassle,' she said." Clara—Ashland, 7/10/2009

"I had just entered Mifflin, when a woman sitting on her porch waved and asked, 'Are you the doctor in the newspaper?' She stood up holding the newspaper in her hand as I answered, yes, and approached the steps to her home. She offered me water. 'That's incredible, I was just reading about you—what karma.' And we talked about healthcare. 'The high deductibles in health insurance are ridiculous,' she said. 'There's a lack of cov-

erage, and you need to keep changing plans to get a decent rate.'" Sharon—Mifflin, 7/10/2009

"Dave has Type I diabetes (insulin-dependent) after suffering a bout of pancreatitis a few years ago. 'Coverage keeps dropping and the cost keeps going up,' he said." Dave—Mifflin, 7/10/2009

"Danelle (pictured here with her two lovely children) described a situation with her cousin, Barbara. She had a hysterectomy which turned out to be a very bloody operation and lasted over four hours. The insurance only allowed a 36-hour hospital stay and the doctor said that she needed more. 'But,' Danelle told me wistfully, 'she was kicked out anyway.'" Danelle—Mansfield, 7/10/2009

"'I've had no insurance most of the last year,' said Ida. She herself has diabetes and her husband has a spinal problems. 'They were very fortunate,' she told me, because her husband 'got his surgery at the Cleveland Clinic under a special program.' It had been an extensive operation involving multiple spinal levels as well as titanium rods being inserted. 'But,' she said, 'all medical expenses were covered.' That's great, I said. 'Well, otherwise, healthcare has been a disaster.'" Ida—Orville, 7/11/2009

"I met Kenneth at McDonald's over breakfast. A retiree, he told me he's been generally pretty healthy. Except for last year when, 'He came down with a serious case of pneumonia.' How'd that go, I asked. 'Not good. I don't feel as strong as before. And, when I returned home, there was a stack of bills waiting for me.' Did you have insurance? 'Yes. But, the insurance pays only what they think is necessary. All sorts of specialists came to see me, and how would I know if it was necessary or not? I ended up owing \$1,800.' He hasn't declared bankruptcy quite yet but, 'I'm getting a lawyer,' he told me. 'And I'm not fully recovered!'" Kenneth—Canton, 7/12/2009

"I met Andrew and his family at the Dairy Queen in Minerva. They have a complicated story. First, there are four members of the family. The youngest daughter who was too shy to get her picture taken (even with her parents and older sister holding the camera) is hidden behind the three. So she's in the picture, but invisible (a parable for the uninsured). Her story will come soon enough. First, Andrew. He's a trucker, worked for CR England for four years and during his employment (when he had health insurance) he had an operation for a total hip replacement. 'I've had this problem for years,' he told me. 'Pain in the hip—both hips actually—and it became dangerous to use pain-killers for a long time. So, I was glad to have the operation.' But the company laid him off ten days after the surgery and he lost his insurance. The complained for wrongful termination and he was actually offered a job to return (Andrew knew the company was at fault) but this new job did not offer any healthcare insurance. So he had to quit. 'My recovery is still slow,' and with such a complicated surgery, follow-up is necessary. But Andrew can't afford the \$300 fee for any of the appointments with the surgeon. Now the story of the little girl. I didn't get her name—let's call her Jane Doe. Her mother told me, 'She's got a terrible problem with her teeth, the dentist said bacteria is eating at her teeth and it could go to her brain.' But because the family lost their coverage, 'We've had to cancel the operation.' So, why is Jane Doe hiding from the camera? Is it because she's a shy four year-old? Or because she's already old enough to be embarrassed about her teeth? Or perhaps she's traumatized by the whole situation, even if she doesn't fully understand it. Or is she simply invisible much like many of the other uninsured.'" Andrew—Minerva, 7/12/2009

"Joyce shared this story about her ex-husband. He had recently had an accident at work. This was covered by Workmen's Compensation. The emergency visit went fine but he needed two heparin shots in follow-up visits to the doctor. The doctor wanted \$1,000 up-front even though they knew that Workmen's Comp would cover it (although the receiving the reimbursement often took months). 'They wouldn't give him the shots without the up-front payment,' and it ended up that his boss loaned him the money. 'See,' Joyce added, 'even when you do have insurance sometimes it doesn't mean nothing.'" Joyce—Lisbon, 7/13/2009

"For the past eleven years, Gary has had Type I diabetes (insulin-dependent diabetes). Up until recently, he has never had insurance. But thankfully, 'the doctors have taken care of me,' he said. He did tell me about a knee operation that cost him about \$10,000. 'But now,' he said, 'his wife has a job, which comes with insurance, and so I'm covered.'" Gary—Lisbon, 7/13/2009

IN TRIBUTE TO GENERAL CARROLL H. "HOWIE" CHANDLER ON THE OCCASION OF HIS RETIREMENT FROM THE UNITED STATES AIR FORCE

HON. MADELEINE Z. BORDALLO

OF GUAM

IN THE HOUSE OF REPRESENTATIVES

Thursday, January 6, 2011

Ms. BORDALLO. Mr. Speaker, I rise today to recognize and commend General Carroll "Howie" Chandler for his distinguished 36 years of service and commitment to the United States Air Force. General Chandler has dedicated his life to the service of this great Nation and I appreciate his leadership efforts with the Air Force particularly in the Pacific area of responsibility.

I had the privilege of working with General Chandler on several initiatives that directly improved the quality of lives of our men and women in uniform on Guam and the Western Pacific. He was instrumental in ensuring the Administration budgeted for several key military construction projects on Guam that directly improved the quality of life for airmen at Andersen Air Force Base. His directive to renovate Building 21000 on Andersen Air Force Base will be critical to more effectively and efficiently using space and facilities to meet mission requirements.

Further, I particularly appreciated General Chandler's leadership in granting local base commanders with the authority and flexibility to address a variety of local issues. Chief among those issues was resolution of access for landlocked private property landowners in northern Guam. General Chandler recognized the importance of empowering local commanders on the ground to identify solutions to longstanding problems that go a long way towards improving the civilian and military community relationship on Guam. He recognized the importance of working together as a key to strengthening bonds in the community.

General Chandler also recognized Guam's strategic importance to our Nation's defense. As Commander of Pacific Air Forces and then as Vice Chief of Staff of the U.S. Air Force, General Chandler has consistently demonstrated through allocation of resources that Guam and Andersen Air Force Base remain vital to the protection of our national interests

and stability, through force projection, in the Asia-Pacific region.

Mr. Speaker, General Chandler has demonstrated exceptional meritorious service during his career with the United States Air Force and has become a distinguished leader to airmen stationed on Guam, Guam Air Guardsmen, indeed all airmen and women across this country. I wish the very best to General Chandler; his wife Eva-Marie; and their three children, Carl, Rose-Marie, and Thomas.

A TRIBUTE TO THOMAS S. "TOMMY" SAMPSON

HON. BRETT GUTHRIE

OF KENTUCKY

IN THE HOUSE OF REPRESENTATIVES

Thursday, January 6, 2011

Mr. GUTHRIE. Mr. Speaker, I rise today to honor the memory of a remarkable Kentuckian, Mr. Thomas S. "Tommy" Sampson, Jr. Over the course of his life, Tommy truly exemplified what it meant to help others.

He dedicated his life to public service, serving as coroner, deputy sheriff, police chief and ambulance driver. Tommy is most widely known for being a pioneer in emergency medicine as the founder and longtime director of Shelby County's Emergency Medical Services.

Throughout all his roles, Tommy was known for his kindness, cheerfulness and passion for helping others.

Tommy was not only dedicated to his community, but also to his family, and enjoyed spending time with his wife Beverly, his son Clark and daughter-in-law Melinda, and his grandchildren Jimmy, Collin and Madison.

While Kentucky may never again see one of its finest sons, the evidence of his legacy will be visible in the countless lives that he touched.

I ask my colleagues to join me in honoring Tommy Sampson for his many great contributions to the Commonwealth of Kentucky. He will forever be appreciated and remembered by a grateful community.

IN HONOR OF DR. OGAN GUREL

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Thursday, January 6, 2011

Mr. KUCINICH. Mr. Speaker, I rise today in honor of Dr. Ogan Gurel, M.D., for the Walk for Healthcare, in which he walked from Chicago, Illinois to Washington, D.C., in June and July of 2009.

Dr. Gurel received his M.D. from Columbia University, where he started his career in health care. He has held a variety of jobs in the industry, including positions in medical research, media, and consulting. During his 700-mile, month-long journey, he spoke with ordinary people, many of whom were uninsured and struggling to pay for their health care, about what they thought of health care reform. He collected their stories and took their pictures.

Mr. Speaker and colleagues, please join me in honoring Dr. Ogan Gurel for the dedication and persistence he demonstrated in his Walk for Healthcare. Regardless of party or position

on health care policy, Dr. Gurel's trek of over 700 miles in one month is admirable, and the lives of the people he met along the way will be remembered forever through his monumental effort.

REMEMBERING TOM VANDERGRIFF

HON. JOE BARTON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, January 6, 2011

Mr. BARTON of Texas. Mr. Speaker, I, along with Representatives BURGESS, GRANGER and MARCHANT, wish to inform the House that on December 30, 2010, the great State of Texas lost a lion. Tom Vandergriff, former mayor of Arlington, Texas, former County Judge of Tarrant County, and former Member of the United States Congress, left this life at the age of 84. All of us in north Texas will mark time from the moment we heard of the loss. The loss is monumental.

Few people have had such a positive impact on the development and quality of life of north Texas, and no one has had a greater impact on Arlington. His friends and admirers are legion, his accomplishments legendary. He was the personification of an ideal, the ideal of a selflessly devoted public servant who always put the people ahead of personal gain or ambition.

Arlington history is generally divided into two epochs: BV and AV, Before Vandergriff and After Vandergriff. He first sought and won elective office in 1951 when he became the "boy mayor" of Arlington at the age of 25. At the time Arlington was a small town on the railroad midway between Dallas and Fort Worth. Vandergriff saw the town's potential and set out to make it a center of prosperity in its own right while fostering a new spirit of cooperation within the north Texas region. Arlington, now the 49th largest city in the U.S. with 370,000 people, would never be the same, and neither would north Texas. Indeed, it was Vandergriff who coined the phrase, "Metroplex," which is still the term usually applied to describe the Dallas-Fort Worth area.

His first major achievement was convincing General Motors executives to locate their new automobile assembly plant in Arlington. His family owned a Chevrolet dealership in town, which gave him access to General Motors Corp. Upon hearing that GM planned to build a plant in north Texas, he sold Arlington as a superior location by telling GM, as he would later tell the story, that if they put the plant in Dallas, it would make Fort Worth angry; if they put it in Fort Worth, it would make Dallas angry. He ended his pitch by convincing them that if they put it in Arlington, everybody would be happy. The plant produced its first automobile in 1954 and today is the only GM plant in the U.S. that makes full-size SUVs.

The GM plant began a building boom in Arlington that has lasted more than 55 years. Knowing a small town on well water could not sustain rapid growth nor accommodate the needs of industry, Vandergriff convinced the voters of Arlington to pass an initiative to build a large reservoir to meet the town's future needs. The effort proved to be as controversial as it was monumental for a small town, but the initiative passed, and Lake Arlington